## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**CLAIMS AS FILED - PART I** 

Application or Docket Number

p 279247 000/2/FM

CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			18				Г	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	MBER EXTRA		ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			34 minus 20=		• 14		Ī	X\$ 9=	<del></del>	OR	X\$18=	252
INDEPENDENT CLAIMS			/ minus 3 =		* Ø			X40=		OR	X80=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=		OR	+270=	270
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	L	TOTAL		OR	TOTAL	1232.00
CLAIMS AS AMENDED - PART II											OTHER	,
		(Column 1)		(Colun		(Column 3)		SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	* INTATION OF MI	Minus	***	T CL AINA	=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NIATION OF MI	JLIIPLE DEI	PENDEN	CLAIM			+135=		OR	+270=	
							<u> </u>	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	AL	ODIT. FEE		8 .	ADDII. FEEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	TATION OF MU	Minus	***	CLAIN	=		X40=		OR	X80=	
_	FINOT PRESE	NIATION OF MIC	JLIIPLE DEI	-CIADCIA	CLAIIVI	ال_ا		+135=		OR	+270=	
							<b>L</b> .	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colu	mn 2)	(Column 3)		)DI1. 1 EE				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		1		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	<u> </u>	Minus	***		<u> </u>		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN.	T CLAIM		╵├╴					
*	If the entry in colu	L	+135=		OR	+270=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	nber Previously Pái	id For" (Total o	r Independ	lent) is the	highest number	r found	d in the app	ropriate box	k in co	lumn 1, .	